Please type	a plus	sign	(+)	inside	this	box	***
-------------	--------	------	-----	--------	------	-----	-----

Substitute for form 1449A/PTO

PTO/SB/08A (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

and to a collection of information	unless it contains a valid OMB control number.
Co	mplete if Known
Application Number	
Filing Date	
First Named Inventor	Kuang, Ming
Group Art Unit	
Examiner Name	

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Under the Paperwork Reduction Act of 1995, no persons are required to res

(use as many sheets as necessary)

**Examiner Name** 200-0407 Sheet Attorney Docket Number

	U.S. PATENT DOCUMENTS					
Examiner Cite		U.S. Patent I	Document	Name of Patentee or Applicant	Date of Publication of	Pages, Columns, Lines, Where Relevant
Initials'	No.1	Number	Kind Code <sup>2</sup> (if_known)	of Cited Document	Cited Document MM-DD-YYYY	Passages or Relevant Figures Appear
DW		5,343,970		Severinsky	09-06-1994	
30)		5,847,469		Tabata et al	12-08-1998	
			-+-		<del> </del>	
					<del></del>	
			$\longrightarrow$			
			<del>  </del>			
			-		<del>                                     </del>	

	FOREIGN PATENT DOCUMENTS								
			oreign Patent Do	cument	Name of Patentee or	Date of Publication of	Pages, Columns, Lines, Where Relevant		
Examiner Initials*	Cite No.1	Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)	Applicant of Cited Document	Gited Document MM-DD-YYYY	Passages or Relevant Figures Appear	T6	
			·						
		<del>                                     </del>						↓	
						<del> </del>		-	
		<del> </del>				<u> </u>		1-	
		<del>                                     </del>		<del></del>		<del> </del>		+	
					<del></del>				
								1	

Examiner	17	Date	7/10/- 3
Signature	Molle	Considered	1118102

\*EXAMINER: Initial if reference considered, whether or not ditation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

<sup>&</sup>lt;sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

ase type a plus sign (+) inside this box   +  ler the Paperwork Reduction Act of 1995, no persons are required to re	U. S. Patent and Trademark Office: U.S. DE	PTO/SB/08B (08-00) 10/31/2002. OMB 0651-0031 PARTMENT OF COMMERCE s a valid OMB control number.
Substitute for form 1449B/PTO	Complete if Kno	s a valid OMB control number.
INFORMATION DISCLOSURE	Application Number	2. S.
STATEMENT BY APPLICANT	Filing Date First Named Inventor	
STATEMENT BY APPLICANT	Group Art Unit	1100
(use as many sheets as necessary)	Examiner Name	17
Sheet 1 of 1	Attorney Docket Number	

	OTHER PRIOR ART NON PATENT LITERATURE DOCUMENTS				
Examiner Initials	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	Т2		
<del></del>					

Examiner	Date	
Signature	Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

considered. Include copy of this form with next communication to applicant.

1 Unique citation designation number. 2 Applicant is to place a check mark here if English language Translation is attached.